

Helping 1.5 million  
children & families  
each year.

**DSHS**

*People Helping People*

Washington State  
Department of  
Social and Health  
Services



# National Provider Identifier (NPI) Introduction to ProviderOne

Workshops - Fall 2006

# Two Separate Initiatives Require Coordination

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## ➤ National Initiative

- Providers must get a National Provider Identifier (NPI) – a standard unique identifier for healthcare providers, effective May 23, 2007

## ➤ State Initiative

- Replacement of DSHS Medicaid payment system (MMIS) with a new system named "ProviderOne" scheduled for late 2007

# Why Talk About This Now?



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- We value the services you provide our clients
- We want to ensure uninterrupted and accurate payments at “go live”
- We want to provide adequate lead time to help you plan for any modifications
- Continuity of service to clients is critical

# It's Early In the Process

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- Detailed approach not fully defined
  - Provide high level road map
  - More information and detail as we approach each set of preparatory tasks
  
- You will have questions we aren't prepared to answer today
  - Capture your questions today for fact sheets and communication tools
  - Share through distribution lists and website

# What You Will Hear About Today

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- Replacement of DSHS Medicaid Management System
- What providers need to do to prepare
- National Provider Identifier (NPI) Overview
- How DSHS will coordinate NPI and new system implementation
- Potential impacts on providers and implications of NPI choices on payments
- How DSHS will collect your NPI's

# Agenda

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- **WELCOME AND INTRODUCTIONS**
- Module 1 - Introduction to ProviderOne
- Module 2 - Magnetic Client ID Card & Determining Client Eligibility
- Q & A Session
- **BREAK**
- Module 3 - National Provider Identifier (NPI)
- Module 4 - DSHS Approach for Managing NPI
- Module 5 - Implications of NPI Choices and ProviderOne
- **BREAK**
- Q & A Session

# Module 1 - Introduction to ProviderOne

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## ➤ OBJECTIVES

- Learn details of the effort to replace current Washington State Medicaid Management System (MMIS) with ProviderOne
- Identify the high level set of tasks providers will need to complete to prepare for ProviderOne
- Melodie Olsen

# Current Medicaid Management Information System (MMIS)

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- Billing and Payment System
  - Processes over 500,000 claims/week
  - Manages over \$70 million dollars/week
  - Supports 1 million Washington residents per year
  - Supports 39,000 active Medicaid providers



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02

1

# Why Replace Current System?

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- Installed in 1982 - Built on 70's technology
- Patchwork of updates & fixes to respond to changing policy, programs and delivery models
- Technical limitations result in manual work-around procedures and systems

# The Future MMIS

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- Named "ProviderOne"
  - **To reflect importance of partnership between DSHS and health care and social service providers**
- Claims Processing System – "transfer system" – already used in another state
- ProviderOne will ultimately become primary payment system for a broad range of social and health services

# What Will DSHS Get With New System?

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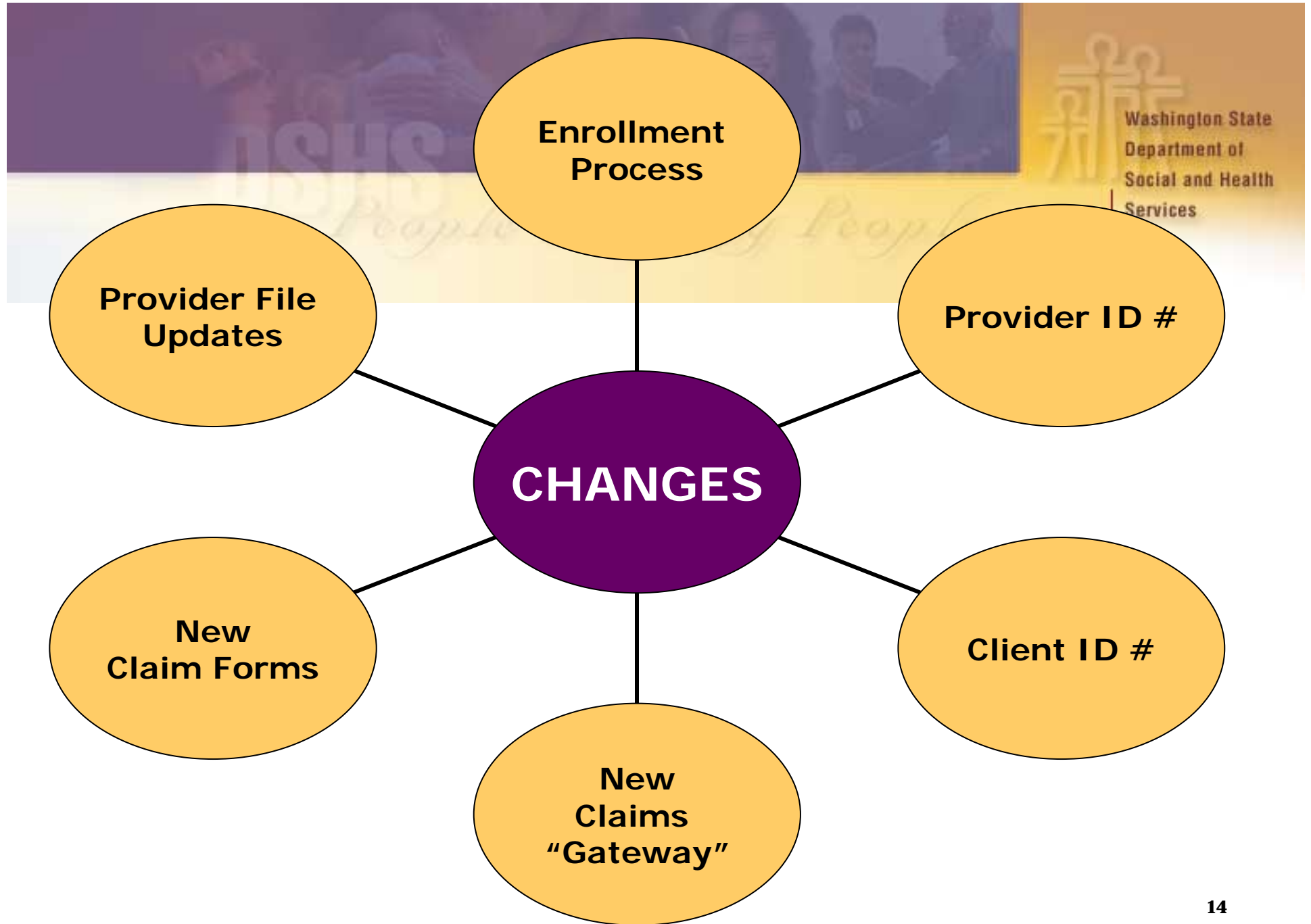
- Easier system maintenance and modifications
- Better service delivery for clients and providers
- Flexible and responsive reporting
- Standardized encounter data
- Improved sharing of information
- Accommodate common provider and client identifier
- Consolidated payment information
- Automation of manual processes and workarounds

# What Will Providers Get With New System?

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## ➤ Examples:

- **Expanded Interactive Voice Recognition (IVR) Transactions**
- **Online Self Services - enrollment and maintenance of your records**
- **Real Time Access to Client Eligibility**
  - **“Swipe” card technology**



# Changes for Providers

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FROM

TO

Current MMIS system utilizes a system assigned **7 digit** numerical Identifier with information imbedded about the provider type



NPI – unique **10 digit** numerical identifier without imbedded information about the provider

Patient Identification Code (PIC) – **14 digit** client ID used in MMIS, containing clients initials, DOB, last name and tiebreaker field



New ProviderOne Client ID – system assigned **static, 9 digit** numerical identifier followed by the letters 'WA' – containing no confidential client information

# Changes for Providers

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FROM

TO

Providers **enroll via paper** applications



Depending on security profiles, some providers may initiate self **enrollment on line** then submit required documentation and signatures on documents printed off the web.

To update provider file, **mail or call** provider service line



Same options **PLUS** most providers will be able to **self-manage address, servicing providers etc. on line**

Remittance Advice (RA) **mailed with warrants**



Warrants will be **mailed separately** from RA's



# Changes for Providers

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Services

FROM

TO

Client **Medical Identification Card** issued monthly (MAID) that contains the Patient Identification Code, birth date, HMO name & phone number, and special programs



Each client issued their own **permanent magnetically encoded Identification card** containing client name, ProviderOne client ID, date of issue & DSHS call center number and website

To verify client eligibility:

- Medical ID Card
- Medicaid Eligibility Verification Systems
- Practice Management Software
- WEB 270/271 transactions
- IVR
- Call Center



All options remain **except Medical ID Card** which will be replaced by the MAG ID card. When "swiped", the provider receives all the info on the old client card and additional client history.

# Changes for Providers

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FROM

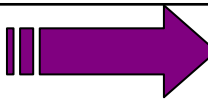
TO

Process claims through  
current DSHS Website



Process claims through ProviderOne Self-  
Service Website

Use Interactive Voice  
Recognition Capability  
(IVR)



ProviderOne IVR with the same functions  
**PLUS** the following, depending on security  
profiles:

- Query Client eligibility
- Query Warrant status
- Query Warrant amount

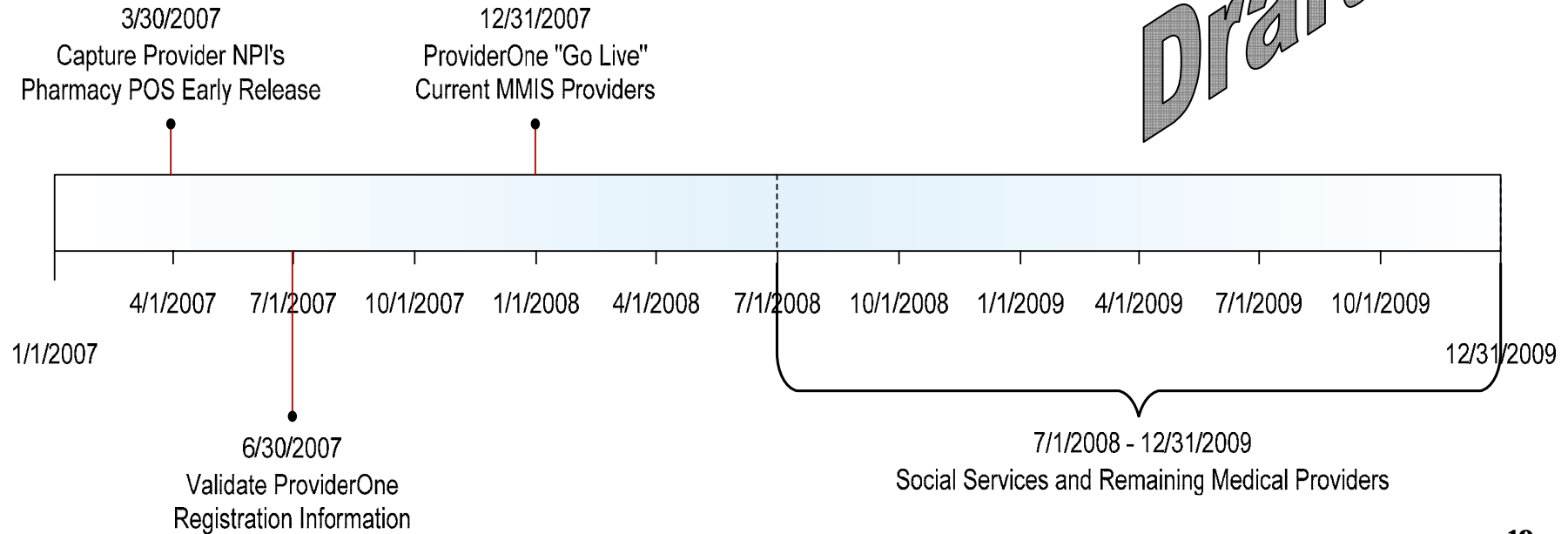
- Query Claim Status
- Query Prior Authorization Status
- Submit Prior Authorizations (Pharmacy)
- Remittance Advice Requests
- Access Frequently Asked Questions
- Complete Surveys
- Deliver Alerts and Notifications

# Implementing ProviderOne

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- Phase 1 - Transition the Medicaid transactions that are currently paid through MMIS
- Phase 2 – Transition remaining Medicaid and non-Medicaid programs

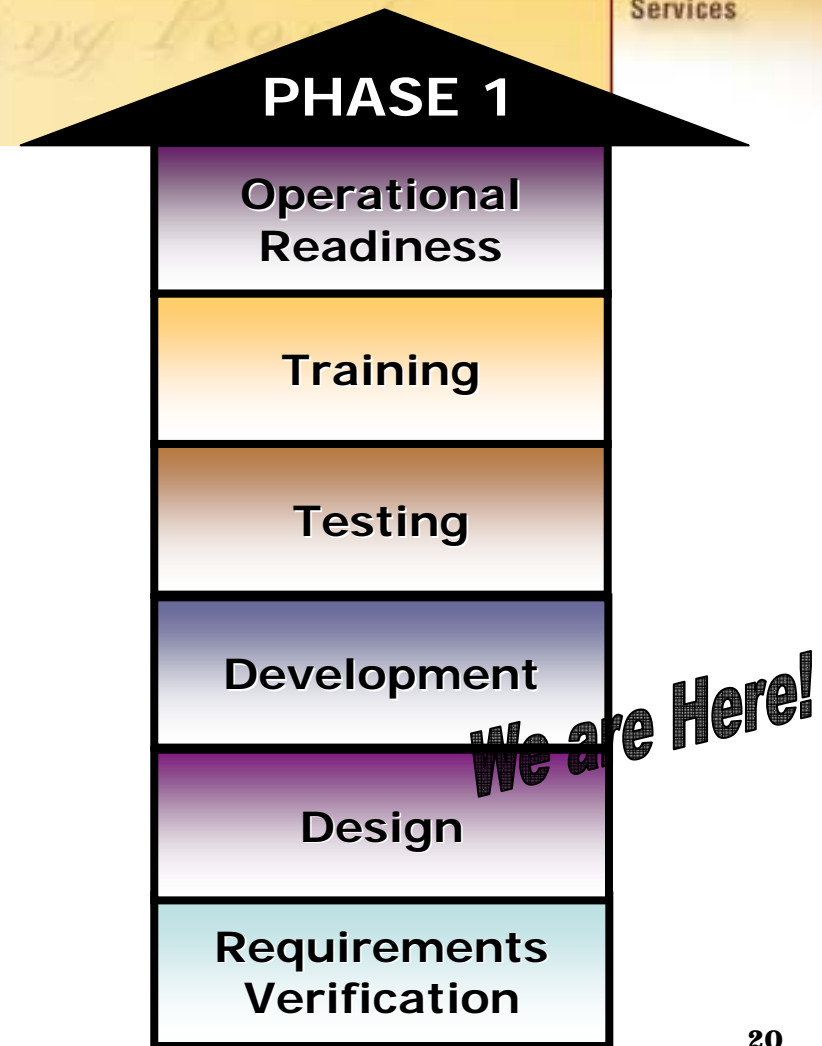
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# Where We Are Today

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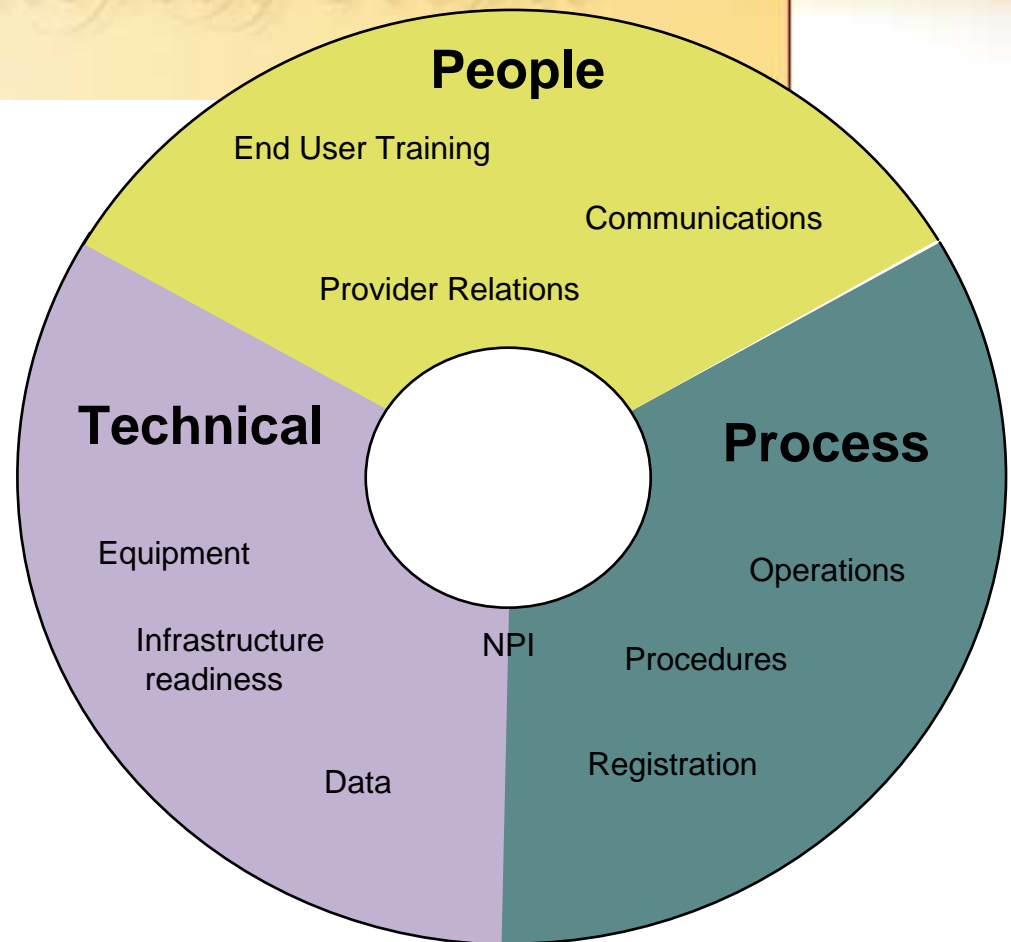
- Phase 1: Transition current MMIS programs
  - Identified what the system needs to do to meet business requirements
  - Designed the changes or new functions needed in ProviderOne
- Next steps – build changes



# Provider Readiness

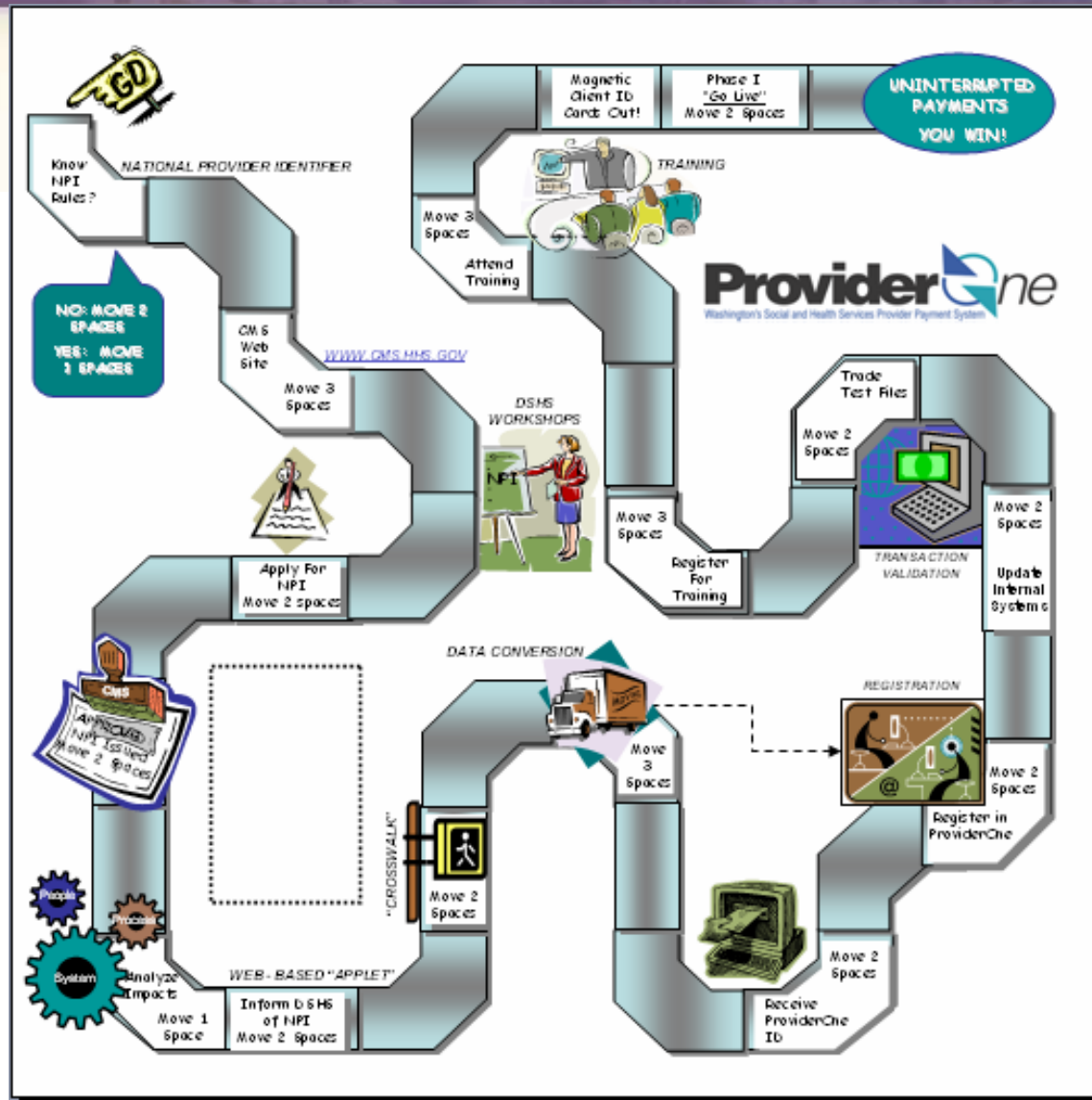
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- The transition to ProviderOne may result in significant impacts to your own billing systems, operational processes, and staff training needs.



# The Road to ProviderOne

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# Provider Readiness

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## *What Providers Need To Do To Prepare*

1. Obtain National Provider Identifier (NPI)
2. Analyze what ProviderOne will mean for your systems, processes and office staff
3. Notify DSHS of your NPI – through web based tool under development
4. Validate information in ProviderOne
5. Modify internal systems and operations
6. Test ability to send and receive electronic transactions
7. Enroll office staff for ProviderOne training



# Our Promise to Providers

*It will take a partnership between providers and DSHS to ensure continuous and accurate payments*

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- Provide “readiness checklist”
- Host informational workshops
- Publish instructional materials
- Keep you informed of ProviderOne developments
- Monitor provider readiness

<http://maa.dshs.wa.gov/mmis>





Questions About ProviderOne?

## Module 2 - New Magnetic Client ID Card and Determining Eligibility

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### ➤ Objectives

- Share details about the replacement of the paper MAID (Medicaid Assistance ID) with a permanent plastic client services card
- Share the features of the card
- Gauge the potential level of interest in the optional feature for accessing client eligibility data

# DSHS Moves to Standard Practice

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- DSHS is moving to the standard practice of issuing permanent plastic client services cards to Medicaid clients.
- We are replacing the paper MAID (Medical Assistance ID) with a plastic card that is more durable, and protects client privacy.

# Methods For Determining Client Eligibility

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## ➤ Today

- Paper Medical ID Card

- 
- WEB 270/271 transactions

- Interactive Voice Recognition (IVR)

- Medicaid Eligibility Verification Systems (MEV) and Practice Management Software

- Call to DSHS

## ➤ With ProviderOne

- Plastic Magnetic ID Card (requires equipment)

- 
- WEB 270/271 -no cost

- Interactive Voice Recognition (IVR)- no cost

- Medicaid Eligibility Verification Systems (MEV) and Practice Management Software

- Call to DSHS - no cost

# ID Card Offers Unique Feature

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- The new client services card carries an additional feature in the form of a magnetic stripe
- The card can be “swiped” through a card reader to enable providers to hit Medicaid eligibility data base – real time
- Receive print out of eligibility data
- Feature is optional – not required

# Why Make the Change?

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- The paper MAID cards are currently mailed to over 500,000 clients each month at an estimated cost of \$2.4M/year
- The new client identification card does not show valuable client information, so if lost or stolen, nothing of value to the client is lost
- Provides another option for providers to verify client eligibility quickly and without human intervention
- Providers can receive accurate, up to date eligibility information

# What's Needed To Use “Swipe” Feature?

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- The provider investment in a card reader is estimated at \$300 each with a \$15/month transaction fee
- Providers can choose to use the card reader over a dedicated phone line or through the internet
- Not required to verify eligibility - DSHS continues to offer all the no cost options
  - **Voice response, web 270/271 transactions or calling DSHS**

# We Want to Hear From You

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- Short survey tool
  - To gauge the potential level of interest in using magnetic swipe card feature in the future
  - Determine which providers might benefit most from this feature
  - Identify any perceived barriers to using the technology
- Survey results used for planning purposes



# Module 3

## National Provider Identifier Overview

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### ➤ OBJECTIVES

- Gain a general understanding of NPI , taxonomy and subparts
- Understand timeframes for new forms
- Provide inventory of educational resources and guidance available to inform your decisions around NPI

Chris Nguyen

# NPI Background

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- Federal Regulation Drives NPI Requirement
  - The Health Insurance Portability and Accountability Act (HIPAA) mandated the adoption of a standard unique identifier for all healthcare providers called the National Provider Identifier (NPI)
- Compliance Date is May 23, 2007
  - Upon implementation all health plans, healthcare clearinghouses, and healthcare providers are to use only the NPI to identify healthcare providers in standard HIPAA transactions.

# Affected Entities



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- Health Care Providers
  - Physicians
  - Dentists
  - Hospitals
- Health Plans
  - Medicare
  - Medicaid
  - Regence Blue Cross Blue Shield
- Health Care Clearinghouses
  - Texas Health Information Network (THIN)
  - MCKESSON
  - Per-Se Technologies

# What is an NPI?

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- NPI is a unique, intelligence free, 10-digit numeric identifier
  - **Assigned to eligible health care providers**
  - **Lifetime assignment - no reuse or sharing**
  - **Health care providers moving to another state will use the same NPI**
- NPI replaces existing provider identifiers
  - **Medicare provider numbers**
  - **Medicaid provider numbers**
  - **Other Payer provider numbers**

# Who Is Required to have An NPI?

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- Health Care Providers that meet the definition in NPI rule
  - **Individuals (Type 1 Provider)**
    - Sole proprietor provider such as a Dentist
  - **Organizations (Type 2 Provider)**
    - Hospitals
    - Medical Clinics
- Entities that never render “health care” are not required
  - **Non-emergent Transportation Services**
  - **Home and Vehicle Modifications**
  - **Assisted Living**
  - **Personal Care**
  - **Adult Day Health**

# How Many NPI's?

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- Individuals (doctors, nurses, dentists) get one NPI regardless of the number of practice locations, contracts etc.
- Organizations (hospitals, nursing facilities, group practices, DME suppliers) get one NPI or some/all subparts may need an NPI

# What is a Subpart?

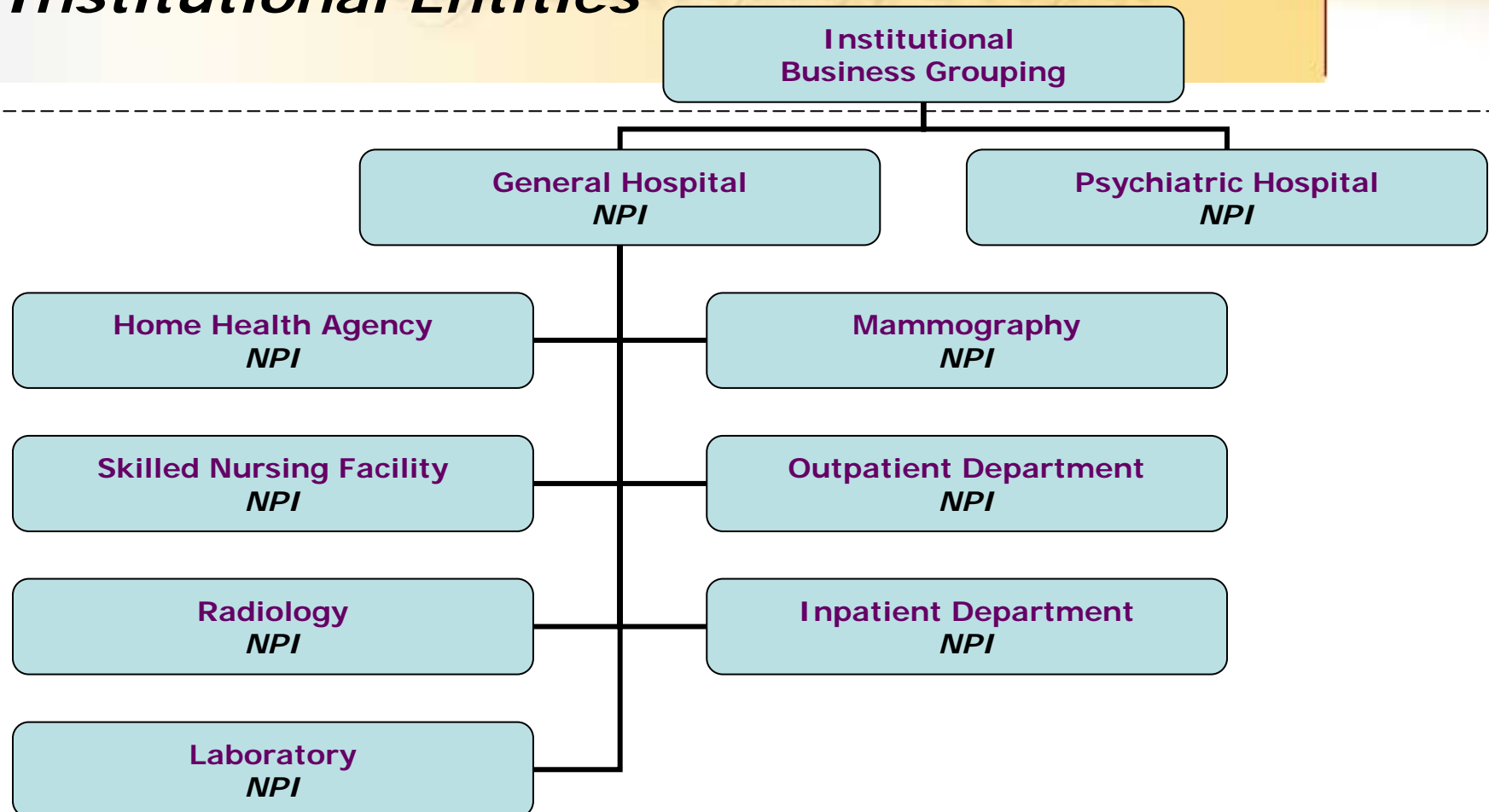
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- Subparts of an organization furnish healthcare but are not legal entities
  - **Components of an organization**
    - Hospital subparts such as Labs, Radiology, Outpatient Department, or Inpatient Department
  - **Separate, physical locations of an organization**
    - Members of chains, such as Pharmacies, DME Suppliers, Nursing Homes
- If subparts of an organization conduct their own standard transactions, they must obtain NPI
- Component that needs to be identified in order to pay/adjudicate claims

# Organizational Subparts

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## *Institutional Entities*

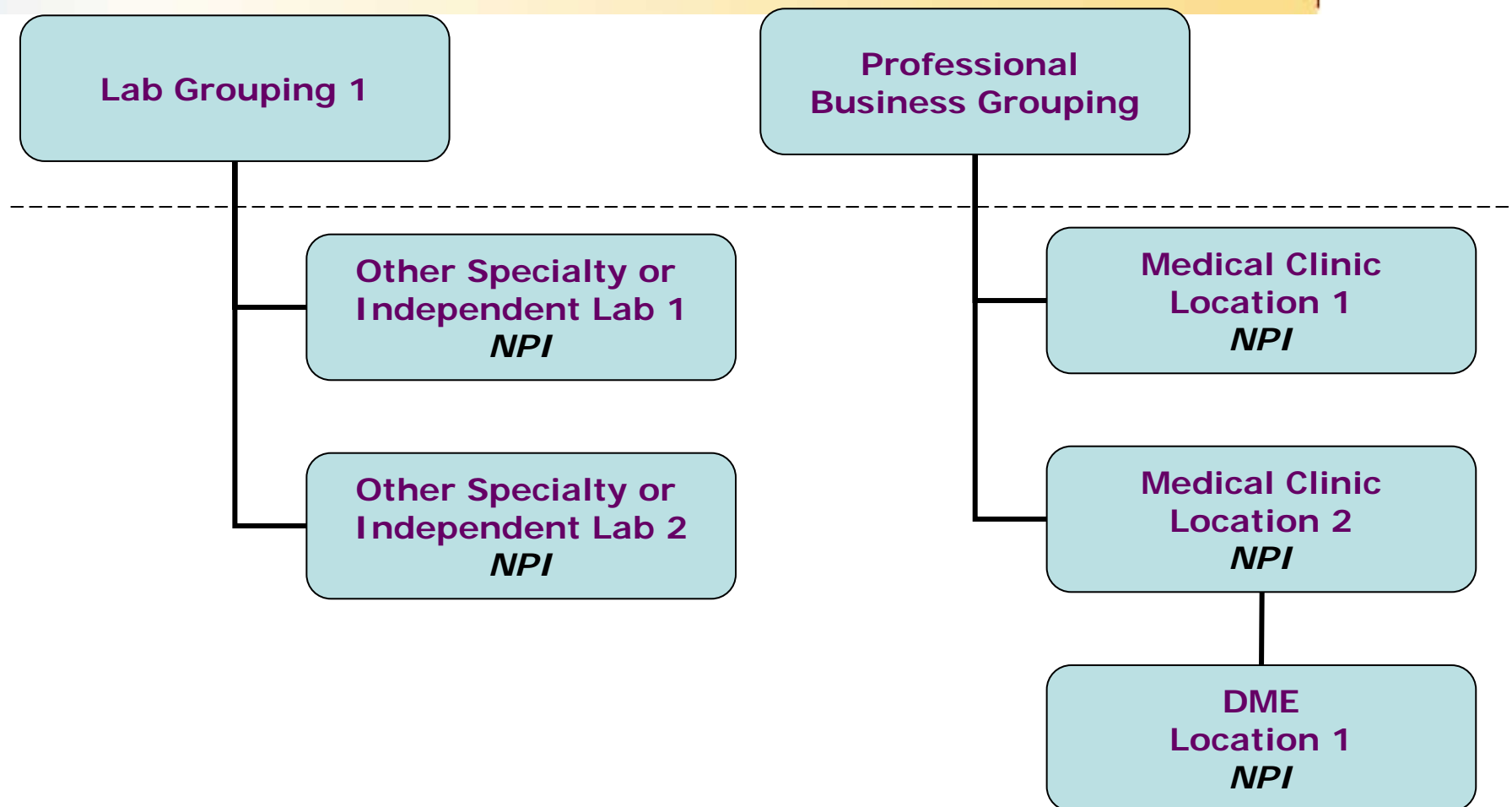




# Organizational Subparts

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## *Professional Entities*



# Medicare's Recommendation

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- DSHS is aligning with Medicare's recommendation on subparts:

## **Obtain a unique NPI** **for all subparts identified**

- Medicare Subpart Expectations Paper
  - <http://www.cms.hhs.gov/NationalProvIdentStand/Downloads/Medsubparts01252006.pdf>

# What is a Taxonomy Code?

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- Healthcare Provider Taxonomy Code is a unique, 10-digit, alphanumeric code to allow a provider to identify their specialty category
  - **Dentist taxonomy code is 122300000X**
- Providers may have one or more than one taxonomy associated to them
  - **Provider who is a Pharmacist and also provides Durable Medical Equipment**
- Providers applying for their NPI will be required to provide their taxonomy information to the National Plan and Provider Enumerator System (NPPES)

# What Is The NPPES?

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- The National Plan and Provider Enumerator System (NPPES) was built to process and assign NPI to providers
  - **Providers required to report any changes to their application information within 30 days of change**
  - **All NPI information and related data stored in NPPES**
  - **Rules regarding obtaining information from the NPPES has not yet been finalized by CMS**
- FOX Systems chosen by CMS as the official NPI enumerator to manage the NPI process
  - **Process NPI applications and updates**
  - **Maintain helpdesk to assist with application process and resolve issues**

# Apply For Your NPI(s)

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- Applying for the NPI is FREE and can be done through the NPES in 3 ways
  - **Interactive Web Application**
  - **Paper application - Request at 1-800-465-3203**
  - **Electronic File Interchange (Bulk Enumeration)**
- Providers are responsible for applying for an NPI and communicating their NPI (s) to all payers including DSHS
- Over 21,341 Washington State health care providers have been assigned NPIs
- If you already have your NPI (s) and determine you want to make changes, you can modify it

# New CMS 1500 Claim Forms & NPI

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- CMS 1500 Claim Form revised to accommodate NPI
- DSHS aligns with the National Uniform Claims Committee (NUCC) recommended timeline:

**Providers can submit either:**

- CMS 1500 12/90 claim form
- CMS 1500 08/05 claim form

2006				2007				
September	October	November	December	January	February	March	April	May

**4/1/07 All claims on  
CMS 1500 (08/05) form**

# New UB-04 Claim Forms & NPI

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- UB-04 Claim Form revised to accommodate NPI
- DSHS aligns with the National Uniform billing Committee (NUBC) recommended timeline:

**Submit either version:**

- UB-92 claim form
- UB-04 claim form

2007							
January	February	March	April	May	June	July	August

**5/23/07 revised UB-04  
form only**

# NPI Educational Resources

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- Medicare's NPI Policy and Recommendations
  - <http://www.cms.hhs.gov/NationalProvIdentStand>
- NPI Tutorial
  - <http://www.cms.hhs.gov/apps/npi/npiviewlet.asp>
- NPI Application and Enumeration
  - <https://nppes.cms.hhs.gov/>
- Provider Based NPI (Subparts)
  - <http://www.wedi.org/>
- Taxonomy Code List
  - <http://www.wpc-edi.com/taxonomy>
- CMS 1500 Claim Form
  - <http://www.nucc.org>
- UB-04 Claim Form
  - <http://www.nubc.org>



# Module 4 – DSHS Approach For Managing NPI

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## ➤ Objectives:

- Understand the approach DSHS will take in managing NPI implementation in advance of ProviderOne Implementation
- Learn why providers need to retain the ability to provide both NPI and current Medicaid ID numbers between 5/23/07 and ProviderOne implementation

Chris Nguyen

# NPI Limitations & CMS Requirements

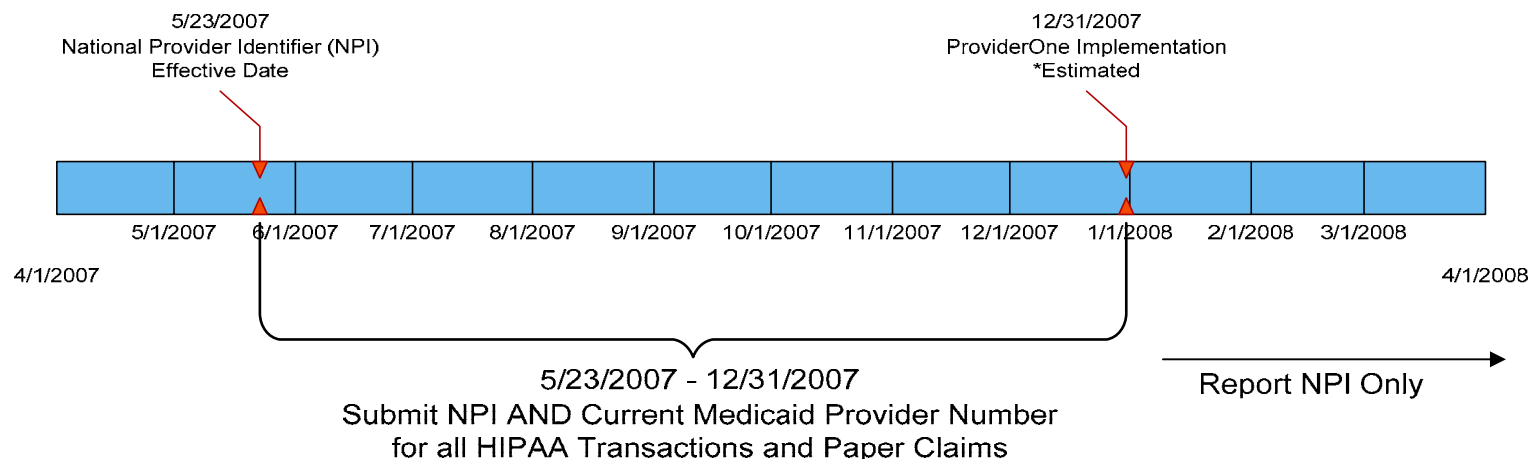


- Health Plans may not dictate how a provider can apply for an NPI
- Health Plans may not require providers to obtain additional NPIs
- Organizations must obtain NPIs for themselves and their subparts meeting the criteria
- The NPI does not replace the Taxpayer Identification Number (TIN) or Drug Enforcement Agency (DEA) Number
- One NPI per individual provider per lifetime

# DSHS Approach to NPI

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- Implement NPI in ProviderOne only
- Require the Medicaid Provider number and NPI on inbound HIPAA transactions and paper claims on and after May 23, 2007 and until the ProviderOne system is implemented.
- Return only the Medicaid Provider number on outbound HIPAA transactions after May 23, 2007 until the ProviderOne system is implemented.



# Module 5 - Implications of NPI Choices and ProviderOne

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## ➤ Objectives

- Understand the implications of the NPI subpart choices on payments from the ProviderOne system
- Understand how DSHS will collect your NPI information

Todd Emans

# Payment Constraints Resulting from NPI Implementation

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- One Pay-To Address per NPI results in...
  - **One Check per NPI and.....**
  - **One Remittance Advice per NPI**
- One Account for Electronic Funds Transfers per NPI

# Consolidate Multiple Numbers To Single NPI & Single Check

## Current MMIS

<b>Provider Number: 1222222</b> <b>Provider Name: Washington Clinicians - Seattle</b> <b>Provider Type: 20 – Physician</b> <b>Provider Specialty: 08 – Family Practice</b>		<b>Clinic 1, Payment Address A and EFT Routing # A</b>
<b>Physical Address</b> 1234 Adams Street Seattle, WA 98518	<b>Billing/Pay-to Address</b> 1234 Adams Street Seattle, WA 98518	
<b>EFT Routing # - 0000-000222</b>		

<b>Provider Number: 1333333</b> <b>Provider Name: Washington Clinicians - Shelton</b> <b>Provider Type: 20 – Physician</b> <b>Provider Specialty: 08 – Family Practice</b>		<b>Clinic 2, Payment Address B and EFT Routing # B</b>
<b>Physical Address</b> 5678 Baker Street Shelton, WA 98518	<b>Billing/Pay-to Address</b> 5678 Baker Street Shelton, WA 98518	
<b>EFT Routing # - 0000-000333</b>		

<b>Provider Number: 1444444</b> <b>Provider Name: Washington Clinicians - Auburn</b> <b>Provider Type: 20 – Physician</b> <b>Provider Specialty: 40 – Pediatrics</b>		<b>Clinic 3, Payment Address C and EFT Routing # C</b>
<b>Physical Address</b> 1357 Chase Street Auburn, WA 98518	<b>Billing/Pay-to Address</b> 1357 Chase Street Auburn, WA 98518	
<b>EFT Routing # - 0000-000444</b>		

## ProviderOne

<b>NPI: 4444444444</b> <b>Provider Name: Washington Clinicians</b> <b>Provider Type: 20 – Physician</b> <b>Provider Specialty: 08 – Family Practice</b>		<b>One Payment Address and one EFT Routing # for all 3 Locations</b>
<b>NPI Base Location Address</b> 1234 Adams Street Seattle, WA 98518	<b>Billing/Pay-to</b> 1234 Adams Street Seattle, WA 98518	
<b>EFT Routing # - 0000-000222</b>		

<b>NPI: 4444444444 – Location 02</b> <b>Provider Name: Washington Clinicians - Shelton</b> <b>Provider Type: 20 – Physician</b> <b>Provider Specialty: 08 – Family Practice</b>	
<b>Location</b> 5678 Baker Street Shelton, WA 98518	<b>NPI: 4444444444 – Location 03</b> <b>Provider Name: Washington Clinicians - Auburn</b> <b>Provider Type: 20 – Physician</b> <b>Provider Specialty: 40 – Pediatrics</b>
<b>Location Address</b> 1357 Chase Street Auburn, WA 98518	

# Retaining Multiple DSHS Payments through NPI Subparts

## Current MMIS

Provider Number: 1222222  
Provider Name: Washington Clinicians - Seattle  
Provider Type: 20 – Physician  
Provider Specialty: 08 – Family Practice

Physical Address      Billing/Pay-to Address  
1234 Adams Street      1234 Adams Street  
Seattle, WA 98518      Seattle, WA 98518

EFT Routing # - 0000-000222

Clinic 1,  
Payment  
Address A  
and EFT  
Routing # A

Provider Number: 1333333  
Provider Name: Washington Clinicians - Shelton  
Provider Type: 20 – Physician  
Provider Specialty: 08 – Family Practice

Physical Address      Billing/Pay-to Address  
5678 Baker Street      5678 Baker Street  
Shelton, WA 98518      Shelton, WA 98518

EFT Routing # - 0000-000333

Clinic 2,  
Payment  
Address B  
and EFT  
Routing # B

Provider Number: 1444444  
Provider Name: Washington Clinicians - Auburn  
Provider Type: 20 – Physician  
Provider Specialty: 40 – Pediatrics

Physical Address      Billing/Pay-to Address  
1357 Chase Street      1357 Chase Street  
Auburn, WA 98518      Auburn, WA 98518

EFT Routing # - 0000-000444

Clinic 3,  
Payment  
Address C  
and EFT  
Routing # C

## ProviderOne

NPI: 4444444444  
Provider Name: Washington Clinicians - Seattle  
Provider Type: 20 – Physician  
Provider Specialty: 08 – Family Practice

NPI Base Location Address      Billing/Pay-to Address  
1234 Adams Street      1234 Adams Street  
Seattle, WA 98518      Seattle, WA 98518

EFT Routing # - 0000-000222

Clinic 1,  
Payment  
Address A  
and EFT  
Routing # A

NPI: 5555555555  
Provider Name: Washington Clinicians - Shelton  
Provider Type: 20 – Physician  
Provider Specialty: 08 – Family Practice

Location Address      Billing/Pay-to Address  
5678 Baker Street      5678 Baker Street  
Shelton, WA 98518      Shelton, WA 98518

EFT Routing # - 0000-000333

Clinic 2,  
Payment  
Address B  
and EFT  
Routing # B

NPI: 6666666666  
Provider Name: Washington Clinicians - Auburn  
Provider Type: 20 – Physician  
Provider Specialty: 40 – Pediatrics

Location Address      Billing/Pay-to Address  
1357 Chase Street      1357 Chase Street  
Auburn, WA 98518      Auburn, WA 98518

EFT Routing # - 0000-000444

Clinic 3,  
Payment  
Address C  
and EFT  
Routing # C

# DSHS Approach For Collecting NPI Numbers From Providers

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- DSHS building a web based tool to capture provider NPI(s)
- By using the tool providers can:
  - **Inform DSHS of NPI**
  - **Map the new NPI to the current Medicaid ID#**
  - **Prepare DSHS to move your data from the current system to ProviderOne**



MM S I D: 1234567

Tax I D Number / SSN: 91-4444444

Legacy I D ( s ) 7000000 ----- NPI 2000000002

Name: Jane Doe C l i n i c i a n s - Tacoma  
Legacy Type: Physi ci an  
Legacy Speci al t y: Pedi at r i c s  
Legacy St at us: Act i ve

Legacy I D ( s ) 7111111 ----- NPI 2000000002

Name: Jane Doe C l i n i c i a n s - Spokane  
Legacy Type: Physi ci an  
Legacy Speci al t y: Pedi at r i c s  
Legacy St at us: Act i ve

Legacy I D ( s ) 7222222 ----- NPI 3000000003

Name: Jane Doe C l i n i c i a n s - Vancouver  
Legacy Type: Physi ci an  
Legacy Speci al t y: Pedi at r i c s  
Legacy St at us: Act i ve

Legacy I D ( s ) 7333333 ----- NPI 4000000004

Name: Jane Doe C l i n i c i a n s - Orak  
Legacy Type: Physi ci an  
Legacy Speci al t y: Pedi at r i c s  
Legacy St at us: Ter mi nat ed

Contact I n f o r m a t i o n:

Name: Jane Doe  
Phone #: (206) 555-1212  
Email: JDC@notmail.com



## Panel Q & A

# What You Can Do Today to Prepare

Washington State  
Department of  
Social and Health  
Services

- Get enough NPI's to ensure appropriate payments
- Ensure your billing systems will continue to support inclusion of legacy Medicaid Id #'s **and** your NPI (s) until ProviderOne
- Inform your systems and office staff of the changes underway



# Questions?

Visit the ProviderOne Internet

<http://maa.dshs.wa.gov/mmis>